



DHMH

Maryland Department of Health and Mental Hygiene

Larry Hogan, Governor – Boyd K. Rutherford, Lt. Governor – Van T. Mitchell, Secretary

Maryland Board of Morticians and Funeral Directors

RENEWAL INSTRUCTIONS FOR CREMATORIES

Note: Postmarked No Later Than September 30, 2016
A late fee of 400.00 will be assessed after October 15, 2016
****No Hand Deliveries Accepted****

This is your renewal notice for the October 1, 2016 through September 30, 2018 permitting period. Please print the application from the Board's website at dhmh.maryland.gov/bom under "Board News".

Please carefully print the name and address of the crematory on the application as well as any other information requested. If there are additions, corrections or changes, please highlight them.

All questions on the renewal application must be answered, including business structure and ownership.

Please include a Letter of Good Standing from the Department of Assessments and Taxation, requested within the past 30 days. If you have questions, please call the Department of Assessments and Taxation at 410-767-1353.

All Crematory Permit applications must include a completed Supervising Crematory Operator Form, which is included, before receiving a permit.

The Board does have the authority to charge a late fee if crematory permit renewals are not received by October 15, 2016. Those who do not renew before October 15, 2016 will be assessed a late fee of \$400.00 as noted in COMAR 10.29.04.02 P Fee Schedule. You may not conduct business without a valid permit. Your current permit expires on September 30th, so if you choose to renew after that date you will be operating without a permit.

The Board staff will, as required by law, review all Comptroller issues to insure they have been resolved before the Board will issue a permit. If you have issues needing resolution, please call the Office of the Comptroller at 410-649-0633, 410-649-0621 or toll free 888-614-6337.

Please remit the renewal fee and make check payable to the Board of Morticians and Funeral Directors. If you have any questions, don't hesitate to call the Board Office at 410-764-4792.



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MARYLAND STATE BOARD OF MORTICIANS AND FUNERAL DIRECTORS

4201 Patterson Avenue . Baltimore, Maryland 21215 . 410-764-4792

RENEWAL APPLICATION FOR CREMATORY PERMIT

(Non Refundable Permit Application Fee - \$350)

A late fee of 400.00 will be charged if the application is not received by October 15, 2016.

GENERAL INFORMATION

Name of Crematory: _____
Federal Tax ID: _____ Permit # _____ CR _____
Manager: _____
Corporate Structure: _____
Address of Record: _____
Location of Crematory: _____
Telephone Number: _____ Fax Number: _____
Email Address: _____

BUSINESS STRUCTURE

Name of Owner/Owners: _____
Business Structure: _____
President: _____ Secretary: _____
Vice President: _____ Treasurer: _____

LICENSING INFORMATION

Other License Numbers/Other Permit Numbers/Other Registration Numbers held in Maryland

State and number of the other Licenses/Permits/Registrations held in other states:

Please provide Letter of Good Standing from DAT.

Please provide copy of Maryland Department of the Environment Permit.

REGISTERED CREMATORY OPERATORS EMPLOYED

_____	_____	_____
_____	_____	_____
_____	_____	_____

Number of Cemators: _____

Manufacturers: _____

Last Manufacturer Inspection Date: _____ Next Inspection Due: _____
(Please include copy of cremator certification)

Viewing Room: YES ☐ NO ☐

Fire Department Occupancy: # _____

Name of Liability Insurance Carrier: _____

I certify that the above statements, to the best of my knowledge and belief are true, correct, and complete and made in good faith. If a crematory permit is granted, I do solemnly swear that the crematory operated under this permit will be operated strictly in compliance with all laws, rules, and regulations of the State Department of Health and Mental Hygiene, the Maryland Board of Morticians and Funeral Directors, and the State of Maryland.

Signature: _____ Date: _____ Title: _____

Subscribed and sworn to before me this _____ day of _____
My Commission expires on _____

SEAL



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(10-1) "Supervising Crematory Operator" means a Crematory Supervisor who is a registered crematory operator and who is responsible to the State Board of Morticians and Funeral Directors for compliance with the Cremation Statute and Regulations for all operations of a crematory.

I _____ Permit No. _____, understand that I

Crematory Supervisor

shall be the crematory supervisor of said crematory and shall, therefore, be responsible for all transactions conducted within the crematory and throughout its entire scope of services, including responsibilities for all advertisements made in connection with said permit. I further understand that I shall be physically present on an as-needed basis to perform the supervision of crematory operations and disposal of dead human bodies by cremation. I agree that I shall be personally responsible for cremations serviced by _____ (Name of Crematory), and the employees of the facility. I further agree that the crematory operated under this permit shall be equipped, maintained and conducted strictly in compliance with the laws of the State of Maryland, in particular, with the Crematory Statute, Title 5 Section 450, Health General, Maryland Annotated Code and the corresponding regulations, and all applicable Federal Trade Commission (FTC Funeral Rules) and OSHA rules. I further affirm that should my authority for the acceptance of such responsibility cease, I will immediately notify the Board.

Signature of Crematory Supervisor

STATE OF MARYLAND

CITY/COUNTY OF _____

I hereby certify that on this _____ day of _____, 20____,
before me a Notary Public of the State and County aforesaid, personally appeared _____
and made oath in due form of law that the foregoing
_____ was his/her voluntary act and deed.

AS WITNESS my hand and Notarial Seal.

Notary Public

My Commission Expires: _____